STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS DEPARTMENT OF BUSINESS REGULATION
DIVISION OF COMMERCIAL LICENSING AND REGULATION
REAL ESTATE
233 Richmond Street, Suite 230
Providence, RI 02903-4230
Tel. (401) 222-2255
(401) 222-4917
TDD (401) 222-2999 FAX (401) 222-6654

INSTRUCTIONS FOR FILING REAL ESTATE VERIFIED COMPLAINT FORM

In accordance with Rhode Island General Laws, Chapter 5-20.5(14), in order for the Rhode Island Department of Business Regulation, Division of Commercial Licensing & Regulation, Real Estate section, to process a real estate complaint, it is required that you complete the verified complaint form attached hereto in its entirety. Your failure to complete any portion of this complaint will automatically result in the Division returning the complaint to you without further action. In such eventuality, please understand that it is not the intention of the Department to avoid its duty but simply to comply fully with the statutory obligations as set forth in the Rhode Island General Laws.

If you have any questions or do not understand the law, please consult with your attorney or legal advisor in order to fully satisfy the requirements of law. The Rhode Island Department of Business Regulation can provide you with general information regarding the complaint form; however, it may not act as your legal advisor or in any other capacity which may improperly affect the Department's ability to properly hear and decide your complaint.

Please note that you are required on this complaint form to set forth the provisions of law which you believe to have been violated as well as set forth a concise statement as to how you believe the violation of law and/or the Rules and Regulations occurred. You are also afforded the opportunity to complete a lengthier complaint narrative setting forth in greater detail what you believe to be the basis for your complaint. Please take sufficient time to read the instructions so that you are fully aware of your obligations in this matter.

The burden of proving your complaint rests upon you as the complaining party. You are therefore required to gather whatever documentation, statements or other evidence that you feel appropriate or necessary in order to prove your complaint. The Department will not act as your attorney in this complaint but rather will act as the regulatory body and weigh the evidence and documentation submitted to determine whether or not you have met your obligations to set forth concisely and clearly a statement of violation of law and/or the Rules and Regulations.

The Department of Business Regulation wishes you to clearly understand that the power and authority of this Department does not permit it to provide you with any type of monetary remedy and/or award even in the event that you prevail and prove the facts surrounding your complaint. The sole power of this Department is to suspend and/or revoke the license of a real estate broker and/or salesperson if the factual basis of your complaint is proven, and if in fact that factual basis constitutes a violation of the law (RIGHL Title 5, 20.5) and/or the Rules and Regulations.

Please also note that upon completing the complaint form and attaching all of the documentation that you wish to submit, that you must have the completed form bearing your signature notarized prior to submission to the Department. Any failure to so notarize your statement and complaint form will automatically result in the Department returning the complaint to you without any action.

After you have submitted all forms and documentation to the Department in its appropriate form, the Department will notify you whether or not there are sufficient facts set forth upon which the Department can proceed with the formal hearing process. In the event that the Department determines that there are insufficient facts or allegations contained in your complaint, you will be so notified in writing and you may amend your complaint or the complaint will be dismissed.

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Comp Instr. 4/12/05

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REAL ESTATE COMPLAINT FORM

Complainant's Name:	nplainant's Name: LAST		MIDDLE	
Residence: STREE	ET	CITY/TOWN	STATE	ZIP
Mailing Address:	(If different from resid	ence)		
Home Telephone		Business Telephone & Extension		
Name, address, and pho	one number of person w	no always knows where	to contact me.	
Licensee(s) about whor Name	m or which I am making Address (Busin	complaint: ness or Residence)		Phone
List section(s) of Law(s) or Rule(s) violated (if known).				
State concisely the basis of your complaint:				
Please attach an additional narrative explaining your allegations. Submit all documents relative to this complaint.				
Date, time, and place of alleged violation:				
Other federal, state, municipal, local agencies or legal counsel I have contacted with regard to this complaint including results of contacts.				
	ed swears to or affirms the gations contained herein			
Signed:		Date:		
Subscribed and A.	l sworn to at D. 20	before me th	nis	_day of
		NOT	ARY PUBLIC	
Office Use Only: Case No.		Date Received:		